



TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Complete if Known	
		Application Number	10/664,091
		Filing Date	September 17, 2003
		First Named Inventor	Kenney
		Art Unit	2812
		Examiner Name	Lindsay
Total Number of Pages In This Submission	7	Attorney Docket Number	292609-605012

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Rudolph J. Buchel Jr. (Reg. No. 43,448) Rudolph J. Buchel, Jr., P.C. P.O. Box 702526 Dallas, Texas 75370-2526
Signature	
Date	September 22, 2004

CERTIFICATION OF TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Rudolph J. Buchel Jr.		
Signature		Date	September 22, 2004

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IFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/664,091 Confirmation No. : 3730
Applicant : Kenney
Filed : September 17, 2003
TC/AU : 2812
Examiner : Lindsay
Docket Number : 292609-605012
Customer No. : 41498
Re : System and Method for Reducing Soft Error Rate Utilizing Customized Epitaxial Layers

MS Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION
(ELECTION)

Sir:

No fees are believed to be necessary at this time. However, in the event that any fees are required for the prosecution of this application, please notify the undersigned. No extension of time is believed necessary. If, however, an extension of time is needed, the extension is requested. Please notify the undersigned.

In response to the Office Action (Restriction Requirement) of **August 23, 2004**, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on **page 2** of this paper.

Remarks/Arguments begin on **page 5** of this paper.

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(A)

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on **September 22, 2004**

by

Rudolph J. Buchel, Jr.